



## Technical Questionnaire

cauliflower

CPVO/TQ-045/2-Rev2

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**01 . Botanical taxon: name of the genus, species or sub-species to which the variety belongs:**

*Brassica oleracea* L. convar. *botrytis* (L.) Alef. var. *botrytis*

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**02 . Applicant:** Name and address

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**03 . Variety denomination:**

a) Where appropriate proposal for a variety denomination:

b) Provisional designation (breeder's reference):

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**04 . Information on the breeding scheme and propagation of the variety \***

**04 . 01 . Type of material \***

*(this question could be confidential)*

hybrid

cross-pollinated variety

self-pollinated variety

parent line

**04 . 02 . Method of propagation of the variety \***

*(this question could be confidential)*

seed propagated

vegetatively propagated

**04 . 03 . Other information***(this question could be confidential)*

Please specify

**05 . Characteristics of the variety to be indicated \****(the number in brackets refers to the corresponding characteristic in the CPVO Technical Protocol; please mark the state of expression which best corresponds)***05 . 01 . Seedling: anthocyanin coloration of hypocotyl (1) \***

1 - absent	Brio
9 - present	Ciren, Dominant

**05 . 02 . Leaf: intensity of colour (with wax if present) (10) \***

1 - very light	
2 - very light to light	
3 - light	Baltimore, Ciren
4 - light to medium	
5 - medium	Barrier Reef, Belot, Calisa
6 - medium to dark	
7 - dark	Arbon, Lecerf
8 - dark to very dark	
9 - very dark	

**05 . 03 . Curd: colour (21) \***

1 - whitish	Astell, Iceberg
2 - yellow	Di Jesi
3 - orange	Cheddar, Sunset
4 - green	Amfora
5 - violet	Graffiti

**05 . 04 . Flower: colour (25) \***

1 - white	Bruce, Ecrin
2 - yellow	Lecerf

**05 . 05 . Earliness in spring planting (26) \***

- 1 - very early
- 2 - very early to early
- 3 - early
- 4 - early to medium
- 5 - medium
- 6 - medium to late
- 7 - late
- 8 - late to very late
- 9 - very late

**05 . 06 . Earliness in summer planting (27) \***

- 1 - very early autumn type
- 2 - very early to early autumn type
- 3 - early autumn type
- 4 - early to medium autumn type
- 5 - medium autumn type
- 6 - medium to late autumn type
- 7 - late autumn type
- 8 - late to very late autumn type
- 9 - very late autumn type
- 10 - very early winter type
- 11 - very early to early winter type
- 12 - early winter type
- 13 - early to medium winter type
- 14 - medium winter type
- 15 - medium to late winter type
- 16 - late winter type
- 17 - late to very late winter type
- 18 - very late winter type

**05 . 07 . Male sterility (28) \***

- |             |                 |
|-------------|-----------------|
| 1 - absent  | Alpha 2         |
| 2 - partial | Dunvez, Odegwen |
| 3 - present | Aviron, Bodilis |

**06 . Similar varieties and differences from these varieties**

Please note that information on similar varieties may help to identify comparable varieties and can avoid an additional period of testing.

**06 . 01 . Are there any similar varieties known? \***

Yes

No

**06 . 02 . Similar varieties and differences from these varieties: \***

Denomination(s) of variety(ies) similar to your candidate variety	Characteristic(s) in which your candidate variety differs from the similar variety(ies)	Describe the expression of the characteristic(s) for the similar variety(ies)	Describe the expression of the characteristic(s) for your candidate variety

**07 . Additional information which may help to distinguish the variety \*****07 . 01 . Resistance to pests and diseases \***

Yes, specify

No

**07 . 02 . In addition to the information provided in sections 05 and 06, are there any additional characteristics which may help to distinguish the variety? \***

Yes, specify

No

**07 . 03 . Are there any special conditions for growing the variety or conducting the examination? \***

Yes, specify

No

**07 . 04 . Other information \***

Yes, specify

No

**07 . 05 . Photo**

It is recommended to provide a representative colour image of full grown plant(s) of the variety to accompany the Technical Questionnaire.

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**08 . GMO-information \***

**08 . 01 . GMO-information required \***

The variety represents a Genetically Modified Organism within the meaning of Article 2(2) of Council Directive EC/2001/18 of 12/03/2001.

Yes

If yes, please attach in point 08.02 a copy of the written attestation of the responsible authorities stating that a technical examination of the variety under Articles 55 and 56 of the Basic Regulation does not pose risks to the environment according to the norms of the above-mentioned Directive.

No

**08 . 02 . In case of GMO, joint attestation of the responsible authorities stating that a technical examination of the variety under Articles 55 and 56 of the Basic Regulation does not pose risks to the environment according to the norms of the above-mentioned Directive.**

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**09 . Information on plant material to be examined \***

The expression of a characteristic or several characteristics of a variety may be affected by factors, such as pests and disease, chemical treatment (e.g. growth retardants or pesticides), effects of tissue culture, different rootstocks, scions taken from different growth phases of a tree, etc. Consequently the plant material to be examined should not have undergone any treatment which would affect the expression of the characteristics of the variety, unless the competent authorities allow or request such treatment. If the plant material has undergone such treatment, full details of the treatment must be given. In this respect, please indicate below, to the best of your knowledge, if the plant material to be examined has been subjected to:

**09 . 01 . Micro-organisms (e.g. virus, bacteria, phytoplasma) \***

Yes, specify

No

**09 . 02 . Chemical treatment (e.g. growth retardant or pesticide) \***

Yes, specify

No

**09 . 03 . Tissue culture \***

Yes, specify

No

**09 . 04 . Other factors \***

Yes, specify

No

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**Attached document(s)**

**The following forms or documents are attached to this application : please tick the relevant boxes**

Other confidential documents

Photo

Remark

**DECLARATIONS \***

I/we hereby declare that to the best of my/our knowledge the information given in this form is complete and correct.

Place

Date

Name

Signature